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FAX FILING IN U.S. PATENT & TRADEMARK OFFICEDATE: October 23, 2006

TIME: _____

TO: Commissioner For Patents Mail Stop Amendment FAX NO.: 571-273-8300

FROM: Lowell L. Carson ADMIN. ASST.: Kathleen Spina

APPLN. NO.: 10/720,420 ATTY. DOCKET NO.: NTP-116US

TITLE OF APPLN.: ORGANIC LIGHT-EMITTING DEVICES AND THEIR ENCAPSULATION METHOD AND
APPLICATION OF THIS METHOD

FILING DATE: November 24, 2003 ART UNIT: 2879

FIRST INVENTOR: YONG QIU CONF. NO.: 5119

TITLE OF DOCUMENT (and List of Attachments): Amendment Response w/Extension of Time.

Transmittal sheet (1 pg.); Amendment Response (6 pgs.); Request for Three Month Extension of Time (2 pgs)(in duplicate); PTO-2038 (1 pg.)

Total Number of Pages: 11 (including this form)

COMMENTS

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TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 11

Application Number	10/720,420	RECEIVED
Filing Date	November 24, 2003	GENTRAL FAX CENTER
First Named Inventor	Yong Qiu	OCT 23 2006
Art Unit	2879	
Examiner Name	Mariceli Santiago	
Attorney Docket No.	NTP-116US	

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/Declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request (original & 1 copy)	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTO-FAX COVER SHEET; PTO-2038.
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

Remarks:

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm Name	RatnerPrestia		
Signature			
Printed Name	Lowell L. Carson		
Date	October 23, 2006	Registration No.	48,548

CERTIFICATE OF TRANSMISSION / MAILING

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Signature	Kathleen Spina	Date	October 23, 2006
Typed or Printed Name	Kathleen Spina		

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